FILED Aug 06, 1999 8:00 am Secretary of State

08-06-1999 90003 013 \*\*\*550.00

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

Mailing Address

JUPITER FL 33432

% BERNARD MOLYNEUX

711 W INDIANTOWN ROAD

**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # L60549

1. Corporation Name

Principal Place of Business

% BERNARD MOLYNEUX

711 W INDIANTOWN RD

SIGNATURE:

JUPITER FL 33432

COUNTRY PINE II, INC.

2. Principal Place of Business   2a. Mailing Address   56-0190375   Applied For Schollage   Suite, Apt. #, etc.   Schollage   Scholl						03/22/1990				
Solite, Apt. #, etc.    Solite, Apt. #, etc.	Principal Place of Business     2a. Mailing Address							Apr	plied For	
Suite, Apt 8, etc.    Suite, Apt 8, etc.   Suite, Apt 8, etc.   Suite, Apt 8, etc.   Size   Status   S	21	26				65-0190375		Not	t Applicable	
27   City & State   City & Cit						E Contiferty of Status Desired		\$8.75 A	dditional	
City \$ State   City \$ State   City \$ State   Country   Zip   Xive   Added to Fees   Xive   Zip   Xive   Zip   Xive   Zip   Xive   X	22	<del></del>				5. Certificate of Status Desired		Fee Red	quired	
Trust fund Certification						6. Election Campaign Financing		\$5.00	May Be	
Zip Country Zip Country Zip Country Zip Country Zip Country Zip	<b>一 ・</b>	·				' -	LJ	Added to	o Fées	
9. Name and Address of Current Registered Agent  9. Name and Address of New Registered Agent  10. Name and Address of New Registered Agent  11. Name and Address of New Registered Agent  82. Street Address (P.O. Box Number is Not Acceptable)  83. Singulary Registered Agent of Dott, in the State of Florida. Such change was authorized by the corporation submits this statement for the purpose of changing is registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and amiliar with, and accept the obligations of, Section 607 0505, Florida Statutes.  83. SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  MOUNT OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  ITILE  MOUNT DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  ITILE  MOUNT STEET ADDRESS  STREET ADDRESS  ORY-ST-ZP  OBLETE  11 TITLE  12 NAME  13 STREET ADDRESS  14 COTY-ST-ZP  14 COTY-ST-ZP  DELETE  14 TITLE  15 CHANGE  15 STREET ADDRESS  15 STREET ADR		Country		Country		8. This corporation owes the cu	rrent year Inta	angible		
9. Name and Address of Current Registered Agent  MOLYNEUX, BERNARD 570 GOLDEN HARBOR DRIVE BOCA RATON FL 33432  11. Pursuant to the provisions of Sections 607,0502 and 607 1508. Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, not accept the obligations of, Section 607,0505, Florids Statutes.  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. ITIME  14. TIME  15. SWEET ADDRESS  OFFICERS AND DRIVE  16. Change Addition  Addition  ADDRESS  OFFICERS AND DRIVE  16. Change Addition  Addition  ADDRESS  OFFICERS AND DRIVE  16. Change Addition  Addition  ADDRESS  OFFICERS AND DRIVE  16. Change Addition  ADDRESS  OFFICERS AND DRIVE  16. Change Addition  ADDRESS  OFFICERS AND DRIVE  17. ST. ZP  18. SWEET ADDRESS  OFFICERS AND DRIVE  18. SWEET	_	25	29 30			Personal Property Tax.		Yes	□No	
MOLYNEUX, BERNARD 570 GOLDEN HARBOR DRIVE BOCA RATON FL 33432  11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes. The above-named corporation submits this statement for the pursoal of changing its registered agent, or both, in the State of Florida Statutes. The above-named corporation submits this statement for the pursoal of changing its registered agent, and familiar with, and accept the obligations of, section 607,5505, Floridas Statutes.  SIGNATURE  TITLE  T	<u> </u>			<del>'</del>		10. Name and Address of New	Registere	Agent		
STOR GOLDEN HARBOR DRIVE BOCA RATON FL 33432  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statute, the above-named corporation submits this statement for the purpose of changing fits registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  SUBMINITY Propriet or the obligations of, Section 607.0505, Florida Statutes.  POFFICERS AND DIRECTORS 13.  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TITLE  D CHETE  12. OFFICERS AND DIRECTORS 11.  12. NAME  STREET ADDRESS  OTY-51.2P  SOCIAL HARBOR DRIVE  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  Addition  NAME  STREET ADDRESS  OTY-51.2P  14. CITY-51.2P  DELETE  21. TITLE  DELETE  31. TITLE  DELETE  31. TITLE  DELETE  31. TITLE  DELETE  31. TITLE  DELETE  41. CITY-51.2P  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  Addition  Addition  Addition  Addition  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  Addition  Addition  Addition  Addition  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  Addition  Addition  Addition  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  Addition  Addition  Addition  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  ADDITIONS/		or manne distribution of a		81	Name		,	<u> </u>		
STOR GOLDEN HARBOR DRIVE BOCA RATON FL 33432  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statute, the above-named corporation submits this statement for the purpose of changing fits registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  SUBMINITY Propriet or the obligations of, Section 607.0505, Florida Statutes.  POFFICERS AND DIRECTORS 13.  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TITLE  D CHETE  12. OFFICERS AND DIRECTORS 11.  12. NAME  STREET ADDRESS  OTY-51.2P  SOCIAL HARBOR DRIVE  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  Addition  NAME  STREET ADDRESS  OTY-51.2P  14. CITY-51.2P  DELETE  21. TITLE  DELETE  31. TITLE  DELETE  31. TITLE  DELETE  31. TITLE  DELETE  31. TITLE  DELETE  41. CITY-51.2P  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  Addition  Addition  Addition  Addition  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  Addition  Addition  Addition  Addition  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  Addition  Addition  Addition  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  Addition  Addition  Addition  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  ADDITIONS/	MOL	YNEUX. BERNARD								
BOCA RATON FL 33432    83	570 GOLDEN HARBOR DRIVE				82 Street Address (P.O. Box Number is Not Acceptable)					
11. Pursuant to the provisions of Sections 607.0502 and 507.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. Jam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. OFFICERS AND DIRECTORS IN 12. OFFICERS AND DIRECTORS IN 13. NADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. OFFICERS AND DIRECTORS IN 13. SIRECT ADDRESS IN 12. OFFICERS AND DIRECTORS IN 13. SIRECT ADDRESS IN 12. OFFICERS AND DIRECTORS IN 13. SIRECT ADDRESS IN 12. OFFICERS AND DIRECTORS IN 14. OFFICERS AND DIRECTORS IN 15. OF					83					
The presuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, I am familiar with, and accept the obligations of, Section 607.0503, Floridas Statutes.  SIGNATURE  SIGNATURE  12. OFFICERS AND DIRECTORS   13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TITLE   D										
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing this registered office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of director's. I hereby accept the appointment as registered agent, I am formillar with, and accept the obligations of, Section 607,0502, Florida Statutes.  SIGNATURE  Signature, Types or printed name of registered agent and title of applicable.  (NOTE: Registered Agent signature inquired when reinstating)  D				84	City			85 Zip C	Code	
office or registered agent, or both, in the State of Horida. Such change was authorized by the corporation's board of directors. Interest agent, in an familiar with, and accept the obligations of, Section 607 (505, F, Florida Statutes).    Signature   Signat					·					
office or registered agent, or both, in the State of Horida. Such change was authorized by the corporation's board of directors. Interest agent, in an familiar with, and accept the obligations of, Section 607 (505, F, Florida Statutes).    Signature   Signat	11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes,	the above	e-named corp	poration submits this statement for th	e purpose of	changing its	registered	
SIGNATURE   Signature, byeed or privated name of registatived agenet and title of applications.   (NOTE: Registatived Agenet dispetture recoursed when reintalisting)   DATE	office or t	enistered agent, or both, in the State 0	t Florida. Such change was auth	ionzea by	the corporati	on's board of directors. I nereby acc	apt the appoir	mileni as reç	jistereu	
Signature, typed or printed name of registered agent and this of applicables   (NOTE: Repairmed Agent sequence which feetiating)   Enc		m lamillat With, and docopt the obligation	31.0 01, 0001011 00110000, 110110							
13.   ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: Re	egistered Ager	it signature require	ed when reinstating)	DATE			
MOLYNEUX, BERNARD   12 NAME   13 STREET ADDRESS   570 GOLDEN HARBOR DRIVE   13 STREET ADDRESS   13 STREET ADDRESS   14 CTTY. ST. ZIP	12.			13.		ADDITIONS/CHANGES TO O	FFICERS AN	D DIRECTO	RS IN 12	
NAME   STREET ADDRESS   STO GOLDEN HARBOR DRIVE   1.3 NAME   1.2 NAME   1.3 NEET ADDRESS   1.4 CITYST-ZIP   1.4 CITYST-ZI	TITLE	D	☐ DELETE	1.1 TITLE				Change	☐ Addition	
STREET ADDRESS   STO GOLDEN HARBOR DRIVE   13 STREET ADDRESS   14 CITY-ST-ZIP     Change   Addition   Additi		<b>~</b>	ļ.	1.2 NAME						
CITY_ST-ZIP   BOCA RATON FL 33432			ļ.		Annuess					
TITLE					1					
		BUCA RATUN FL 33432			I-ZIP			☐ Change		
2.3 STREET ADDRESS   2.4 CITY-ST-ZIP	TITLE		C) DELETE							
Change	NAME		:	2.2 NAME						
TITLE	STREET ADDRESS		İ	2.3 STREET	ADDRESS					
NAME	CITY-ST-ZIP	2.41		2. 4 CITY-5	T-ZIP					
STREET ADDRESS   3.3 STREET ADDRESS	TITLE	☐ DELETE 3.1 T		3.1 TITLE				Change	Addition	
34 CITY-ST-ZIP	NAME			3.2 NAME						
34. CITY-ST-ZIP	STREET ADDRESS			3.3 STREET	ADDRESS					
DELETE	-									
NAME			☐ DELETE	•	/		_	Change	☐ Addition	
Addition		J	<u></u>			•				
Addition		,		•	r ADDDEEC					
DELETE   DELETE   S.1 TITLE   Change   Addition	STREET ADDRESS									
NAME			∏ perett		1-414			☐ Channe	☐ Aridition	
5.3 STREET ADDRESS			[] DELETE							
STREET ADDRESS   S4 CITY-ST-ZIP     S4 CITY-ST-ZIP     Change   Addition	NAME				4000555					
DELETE	STREET ADDRESS				- 1					
NAME  6.2 NAME  STREET ADDRESS  CITY-ST-ZIP  6.3 STREET ADDRESS  6.4 CITY-ST-ZIP  6.4 CITY-ST-ZIP  6.5 Coden 110 O7/37(1) Florido Statutos Liguthor codific that the information	CITY-ST-ZIP				T-ZIP				F-1 4 4 199	
STREET ADDRESS  6.3 STREET ADDRESS  CITY-ST-ZIP  6.4 CITY-ST-ZIP  6.5 STREET ADDRESS  6.5 STREET ADDRESS  6.6 CITY-ST-ZIP	TITLE		☐ DELETE	6.1 TITLE				☐ Change	☐ Addition	
64 CITY-ST-ZIP  64 CITY-ST-ZIP  64 CITY-ST-ZIP  64 CITY-ST-ZIP  64 CITY-ST-ZIP	NAME			6.2 NAME						
CITY-ST-ZIP 64 CITY-ST-ZIP 64 CITY-ST-ZIP	STREET ADDRESS			6.3 STREET	TADDRESS					
UIT-51-2P				6.4 CITY-S	ĭ-ZIP					
indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered:	44 11 11	! certify that the information supplied with	h this filing does not qualify for th			Section 119.07(3)(i), Florida Statutes	. I further cer	tify that the in	nformation	
officer or director of the corporation or the receiver or trustee epipowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with a paddress, with all other like empowered:	indicated	on this annual report or supplemental	annual report is true and accura-	te and tha	t my signatur	e shall have the same legal effect as	if made unde	er oath; that !	l am an	
	officer or Block 12	or Block 13 if changed, or on an attact	ver or trustee epipowered to exe iment with a praddress, with all o	ther like e	mbowě <b>teq:</b> shou as tedn	ined by Chapter 607, Florida Statute	:5, and that III	y name appe	JU13 III	